

Wound is defined as more than a simple redness or abrasion.

Stage two pressure ulcer is defined as a partial thickness loss of skin layers that presents clinically as an abrasion, blister, or shallow crater.

5. Skin Care. Skin care is defined as a recognized therapeutic measure in response to an identified High Risk or Unstable condition which is related to a medical condition. Preventative skin care is not coded.

6. Rehabilitative Procedures. Rehabilitative procedures are to be included if used for RESTORATIVE measures only (do not include maintenance measures). Progress notes shall reflect progress toward the goal, as stated on the plan of care.

These procedures may also be carried out as follow-up to a specific physical therapy program.

In addition, physician-prescribed programs which are not a follow-up to a physical-therapy program may also be considered to be rehabilitative procedures. Rehabilitative procedures must be aimed at restoring a skill which has been functionally lost or compromised to the point of becoming dysfunctional.

7/8. Toileting (Bowel or Bladder Rehabilitation Program). The medical record shall establish that there is potential for bowel or bladder rehabilitation. Progress notes shall reflect progress toward the goal as stated on the plan of care. The approach shall be more comprehensive than scheduled toileting.

- 9. Hyperalimentation
- 10. Intravenous fluids
- 11. Intravenous medications
- 12. Blood transfusions

13. Drainage tubes (tubes which drain secretions other than normal body fluids)
14. Symptom Control for the Terminally Ill. Symptom control for the terminally ill means a program designed by a physician, registered nurse and the resident, for ongoing management of pain, nausea or other disabling symptoms. The medical record shall establish that a terminal illness has been diagnosed by the physician.
15. Isolation Precautions - Isolation may be coded as special nursing treatment when nursing procedures are required and used which are over and above universal precautions as defined by the Center for Disease Control (CDC) for clients who have an identified high risk or unstable condition and meet the other criteria for special treatment. Cohorting without isolation precautions in excess of universal precautions shall not warrant isolation coding.

H. CRITERIA FOR CLINICAL MONITORING. In order to receive case mix credit for Special Nursing Treatment Clinical Monitoring shall take place on every shift (with the exception of Tube Feedings.)

Clinical monitoring includes nursing observations emanating from the resident's DIAGNOSIS and Medically Unstable or High Risk Condition(s).

The medical record shall establish that:

1. The physician has identified the unstable condition for which the clinical monitoring is needed. The physician may use a progress note, a doctor's order, or another method as long as the condition has been identified as unstable or high risk. The plan of care shall not be acceptable as a method of identification of the unstable condition. The plan of care shall be developed from the identification of the unstable condition.
2. A registered nurse has assessed the high risk condition. The R.N. assessment of the high risk condition may be a progress note, statement on the checklist, nurse's note, or other written indication.

3. A written plan for clinical monitoring has been developed; and is included on the comprehensive plan of care (individually or in conjunction with a special treatment).
4. Systematically recorded measurements of the status of the high risk condition directly related to the special nursing treatment have been made (may be collected by any member of the nursing staff).
5. Scoring of Clinical Monitoring
  0. Less than once a day
  1. Less than all shifts each day
  2. Monitoring on every shift

202. RESIDENT NURSING ASSESSMENT CLASSIFICATION

- A. ADL CATEGORIES. Review scores on the 8 Key Activities of Daily Living (ADL's) to determine the total number of ADL's in which the resident is considered dependent. ADL's and dependency scores are as follows:

ADL's	Not Dependent	Dependent
Dressing	0-1	2-4
Grooming	0-1	2-3
Bathing	0-3	4-5
Eating	0-1	2-4
Bed Mobility	0-1	2-3
Transferring	0-1	2-4
Ambulation	0-1	2-4
Toileting	0	1-6

Based on the number of Key Activities of Daily Living (ADL's) in which the resident is considered dependent, the resident is categorized as follows:

	Dependent In	ADL Category
LOW ADL	0-3 ADL's	A
MEDIUM ADL	4-6 ADL's	B
HIGH ADL	7-8 ADL's	C

B. CASE MIX CLASSIFICATION AND WEIGHTS. The following describes how each of the 11 case mix classifications and corresponding weights are determined:

1. If the resident receives Special Nursing Treatment and Clinical Monitoring is scored as a "2" (Clinical Monitoring is not necessary for tube feeding), then the Case Mix Classification and weight shall be as follows:

ADL CATEGORY	CASE MIX CLASSIFICATION	CASE MIX WEIGHT
A	A-3	1.64
B	B-3	2.29
C	C-5	4.12

2. If the resident is ADL Category "A" or "B," does not receive Special Nursing Treatment along with Clinical Monitoring on all three shifts, is not receiving tube feeding, and behavior has a score of 2 or more; then the Case Mix Classification and Weight shall be as follows:

ADL CATEGORY	CASE MIX CLASSIFICATION	CASE MIX WEIGHT
A	A-2	1.30
B	B-2	2.27

3. If the resident is ADL Category "A" or "B," does not receive Special Nursing Treatment along with Clinical Monitoring on all three shifts, is not receiving tube feeding, and behavior has a score of less than 2; then the Case Mix Classification and Weight shall be as follows:

ADL CATEGORY	CASE MIX CLASSIFICATION	CASE MIX WEIGHT
A	A-1	1.00
B	B-1	1.95



4. If the resident is ADL Category "C," does not receive Special Nursing Treatment along with Clinical Monitoring on all three shifts, is not receiving tube feeding, has a score of less than 3 in eating, and does not have a behavior score of 2 or more; then the Case Mix Classification and Weight shall be as follows:

ADL CATEGORY	CASE MIX CLASSIFICATION	CASE MIX WEIGHT
C	C-1	2.56

5. If the resident is ADL Category "C," does not receive Special Nursing Treatment along with Clinical Monitoring on all three shifts, is not receiving tube feeding, has a score of less than 3 in eating, and does have a behavior score of 2 or more; then the Case Mix Classification and Weight shall be as follows:

ADL CATEGORY	CASE MIX CLASSIFICATION	CASE MIX WEIGHT
C	C-2	3.07

6. If the resident is ADL Category "C," does not receive Special Nursing Treatment along with Clinical Monitoring on all three shifts, is not receiving tube feeding, has a score of 3 or more in eating, and does not have a behavior score greater than 2 or one of the following neuro-muscular diagnoses taken from the publication "International Classification of Diseases," 9th revision, Clinical Modification, (ICD-9-CM):

Diseases of nervous system excluding sense organs  
(Codes 320-359 excluding 331.0)

Cerebrovascular Diseases (Codes 430-438  
excluding 437)

Fracture of skull (Codes 800-804) excluding  
cases without intracranial injury

Intracranial injury, excluding those with skull  
fractures (Codes 850-854)

Fracture of vertebral column with spinal cord  
injury (Code 806)

Spinal cord injury without evidence of spinal  
bone injury (Code 952)

Injury to nerve roots and spinal plexus (Code  
953)

Neoplasms of the brain and spine (Codes 170.2,  
170.6, 191, 192, 198.3, 198.4, 213.2,  
213.6, 225, 237.5, 237.6, and 239.6)

Then the Case Mix Classification and Weight shall  
be as follows:

ADL CATEGORY	CASE MIX CLASSIFICATION	CASE MIX WEIGHT
C	C-3	3.25